

COMPLAINT BY A PRISONER UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983

Name: Wilkins Rudy
 (Last) (First) (Middle)

Prisoner Number: 010AQM932

Institutional Address: 5325 Broder Blvd, Dublin, California
94568.

UNITED STATES DISTRICT COURT
 NORTHERN DISTRICT OF CALIFORNIA

RUDY WILKINS

(Enter your full name.)

vs.

Alameda County Sheriff's
Office's, & Corizon Medi-
cal Services.

(Enter the full name(s) of the defendant(s) in this action.)

Case No. _____
 (Leave blank; to be provided by Clerk of Court)

COMPLAINT UNDER THE
 CIVIL RIGHTS ACT,
 42 U.S.C. § 1983

I. Exhaustion of Administrative Remedies.

Note: You must exhaust available administrative remedies before your claim can go forward. The court will dismiss any unexhausted claims.

A. Place of present confinement Santa Rita Jail, Alameda County.

B. Is there a grievance procedure in this institution? YES ☒ NO ☐

C. If so, did you present the facts in your complaint for review through the grievance procedure? YES ☒ NO ☐

D. If your answer is YES, list the appeal number and the date and result of the appeal at each level of review. If you did not pursue any available level of appeal, explain why.

1. Informal appeal: (14-0346/3-29-14)(14-0504/4-12-14)(14-
0555/5-10-14)(14-1450/11-1-14)(13G-S1276/9-3-13)(13G-S
1328/9-9-2013)(13G-S0352/ALL DENIED, 5-9-2013)(13G-S1433/10-12-2013)

2. First formal level: (14-0346/3-29-14)(14-0504/4-12-14)(14-0555/5-10-14)(14-1450/11-1-14)(13G-S1276/9-3-13)(13G-S1328/9-9-2013)(13G-S0352/ALL DENIED, 5-9-2013)(13G-S1433/10-12-2013).
 3. Second formal level: (14-0346/3-29-14)(14-0504/4-12-14)(14-0555/5-10-14)(14-1450/11-1-14)(13G-S1276/9-3-13)(13G-S1328/9-9-2013)(13G-S0352/ALL DENIED, 5-9-2013)(13G-S1433/10-12-2013).
 4. Third formal level: (14-0346/3-29-14)(14-0504/4-12-14)(14-0555/5-10-14)(14-1450/11-1-14)(13G-S1276/9-3-13)(13G-S1328/9-9-2013)(13G-S0352/ALL DENIED, 5-9-2013)(13G-S1433/10-12-2013).

E. Is the last level to which you appealed the highest level of appeal available to you?

YES ☒ NO ☐

F. If you did not present your claim for review through the grievance procedure, explain why.

I HAVE EXHAUST, ALL AVAILABLE ADMINISTRATIVE REMEDIES, UNDER 42 U.S.C. § 1997e.

II. Parties.

A. Write your name and present address. Do the same for additional plaintiffs, if any.

RUDY WILKINS

5325 BRODER BLVD, DUBLIN, CALIFORNIA 94568

A.C.S.O., AT SANTA RITA JAIL.

B. For each defendant, provide full name, official position and place of employment.

1). Gregory J. Ahern; Sheriff; ALAMEDA COUNTY SHERIFF OFFICE.

2). Dr. Glenda Newell; Doctor; CORIZON, P.H.S. (Santa Rita Jail.)

3). Dr. Maria Luisita Magat; Doctor; CORIZON, P.H.S. (Santa Rita Jail.)

4). Dr. Khin Tha; Doctor; CORIZON, P.H.S. (Santa Rita Jail.)

5). Dr. Chin; Doctor; CORIZON, P.H.S. (Santa Rita Jail.)

III. Statement of Claim.

State briefly the facts of your case. Be sure to describe how each defendant is involved and to include dates, when possible. Do not give any legal arguments or cite any cases or statutes. If you have more than one claim, each claim should be set forth in a separate numbered paragraph.

A). The Sheriff's Offices, Switching from bars of Soap to onli-
uid Soap Substance, which after a few use's cause harmful dama-
ging the ~~meat~~ Surface of my skin all over my body. 3-16-2014 date
filed. B). The medical provider, CORZON; Adequately not treat-
ing me with medication that would help my skin to heal, back to
normal.

C). The alameda County Sheriff and CORZON Medical Staff denying
me COLD WHEATER clothing, (Long sleeve Jacket - Close toe Shoes).
Dr. Glenda Newell; Dr. Maria Luisita Magat; Dr. Khin Tha; & Dr.-
Chin of CORZON; When pointed out to Dr. Chin that federal & St-
ate laws was being violated, Dr. Chin Response I don't care
about laws or Prisoner civil rights.

IV. Relief.

Your complaint must include a request for specific relief. State briefly exactly what you want the court to do for you. Do not make legal arguments and do not cite any cases or statutes.

I Would Like for the court to Grant Me Litigation of the
issues & Amends me Monetary; I will accept Monetary re-
lief as Compensation for all injury's, Mental, Demoralizing
mind State; Also physical damage skin; All over the
Surface of my body.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Signed this 2 day of April, 2015

Rudy Wilkins
(Plaintiff's signature)

Please continue to the next page.

MAGISTRATE JUDGE JURISDICTION

Please indicate below by checking **one** of the two boxes whether you choose to consent or decline to consent to magistrate judge jurisdiction in this matter. Sign this form below your selection.

☒ **Consent to Magistrate Judge Jurisdiction**

In accordance with the provisions of 28 U.S.C. § 636(c), I voluntarily **consent** to have a United States magistrate judge conduct all further proceedings in this case, including trial and entry of final judgment.

OR

☐ **Decline Magistrate Judge Jurisdiction**

In accordance with the provisions of 28 U.S.C. § 636(c), I **decline** to have a United States magistrate judge conduct all further proceedings in this case, including trial and entry of final judgment.

Signed this 2 day of April, 2015

Rudy Williams
(Plaintiff's signature)

JS 44 (Rev. 12/12)

CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

I. (a) PLAINTIFFS

RUDY Wilkins

(b) County of Residence of First Listed Plaintiff

Alameda

(EXCEPT IN U.S. PLAINTIFF CASES)

(c) Attorneys (Firm Name, Address, and Telephone Number)

PRO-PER Rudy Wilkins - Santa Rita Jail.

DEFENDANTS

Alameda County Sheriff's
Offices & Corizon Medical

County of Residence of First Listed Defendant

ALAMEDA

(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.

Attorneys (If Known)

NOT KNOWN.

II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- ☐ 1 U.S. Government Plaintiff
- ☐ 2 U.S. Government Defendant
- ☐ 3 Federal Question (U.S. Government Not a Party)
- ☐ 4 Diversity (Indicate Citizenship of Parties in Item III)

III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)

- | | | | | | |
|-----------------------------------------|-------------------------------------------|--------------------------------|---------------------------------------------------------------|--------------------------------|-------------------------------------------|
| Citizen of This State | PTF <input checked="" type="checkbox"/> 1 | DEF <input type="checkbox"/> 1 | Incorporated or Principal Place of Business in This State | PTF <input type="checkbox"/> 4 | DEF <input checked="" type="checkbox"/> 4 |
| Citizen of Another State | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 | Incorporated and Principal Place of Business in Another State | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| Citizen or Subject of a Foreign Country | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 | Foreign Nation | <input type="checkbox"/> 6 | <input type="checkbox"/> 6 |

IV. NATURE OF SUIT (Place an "X" in One Box Only)

<input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise	PERSONAL INJURY <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury <input checked="" type="checkbox"/> 362 Personal Injury - Medical Malpractice	PERSONAL INJURY <input checked="" type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 367 Health Care/Pharmaceutical Personal Injury Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability PERSONAL PROPERTY <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	<input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 690 Other	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 PROPERTY RIGHTS <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 840 Trademark	<input type="checkbox"/> 375 False Claims Act <input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 480 Consumer Credit <input type="checkbox"/> 490 Cable/Sat TV <input type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 896 Arbitration <input type="checkbox"/> 899 Administrative Procedure Act/Review or Appeal of Agency Decision <input type="checkbox"/> 950 Constitutionality of State Statutes
REAL PROPERTY <input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property	CIVIL RIGHTS <input checked="" type="checkbox"/> 440 Other Civil Rights <input type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/Accommodations <input type="checkbox"/> 445 Amer. w/Disabilities - Employment <input type="checkbox"/> 446 Amer. w/Disabilities - Other <input type="checkbox"/> 448 Education	PRISONER PETITIONS Habeas Corpus: <input type="checkbox"/> 463 Alien Detainee <input type="checkbox"/> 510 Motions to Vacate Sentence <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty Other: <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input checked="" type="checkbox"/> 555 Prison Condition <input checked="" type="checkbox"/> 560 Civil Detainee - Conditions of Confinement	<input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Management Relations <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 751 Family and Medical Leave Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Employee Retirement Income Security Act	SOCIAL SECURITY <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g))	FEDERAL TAX SUITS <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609
IMMIGRATION <input type="checkbox"/> 462 Naturalization Application <input type="checkbox"/> 465 Other Immigration Actions					

V. ORIGIN (Place an "X" in One Box Only)

- ☒ 1 Original Proceeding
- ☐ 2 Removed from State Court
- ☐ 3 Remanded from Appellate Court
- ☐ 4 Reinstated or Reopened
- ☐ 5 Transferred from Another District (specify)
- ☐ 6 Multidistrict Litigation

VI. CAUSE OF ACTION

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity):

42 U.S.C. 1983

Brief description of cause:

PRISONER CIVIL RIGHTS, PRISON CONDITION, MEDICAL DELAY AND DENTAL

VII. REQUESTED IN COMPLAINT:

☐ CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P.

DEMAND \$

UNSPECIFIED,

CHECK YES only if demanded in complaint:

JURY DEMAND:

☐ Yes ☒ No

VIII. RELATED CASE(S)

IF ANY

NONE

(See Instructions):

JUDGE

DOCKET NUMBER

DATE

April 2-2015

SIGNATURE OF ATTORNEY OF RECORD

PRO-PER, Rudy Wilkins

FOR OFFICE USE ONLY

RECEIPT #

AMOUNT

APPLYING IFP

JUDGE

MAG. JUDGE